

07/27/01

1130 U.S. PTO

07-30-01

Express Mail Mailing Label No. EL816799007US

A

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. ITI-002CN

First Named Inventor Salas

Title

Method and Apparatus for Controlling Access to a Product

APPLICATION ELEMENTS

ADDRESS TO: Box Patent Application
Commissioner for Patents
Washington, D.C. 202311. ☒ Fee Transmittal Form (2 copies)2. ☒ Small Entity Status☒ Applicant claims small entity status☒ Status established in prior application and is still proper and desired3. ☒ Specification and Drawings [Total Pages 48]

- Written Description - (30 pages)

- Claims - (3 pages)

- Abstract - (1 page)

- Sheets of Drawings - (13 sheets)

☐ Formal☒ Informal4. ☒ Oath or Declaration [Total Pages 5]a. ☐ Newly executed (original)b. ☒ Copy from a prior application (37 CFR 1.63(d))

(for continuation/divisional with Box 17 completed)

[Note Box 5 below]

5. ☒ Incorporation by Reference (usable if Box 4b is checked)

The entire Disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

6. ☒ Application Data Sheet7. ☐ Nucleotide and/or Amino Acid Sequence Submission☐ Computer Readable Copy☐ Paper Copy (identical to computer copy)☐ CD (identical to computer copy)☐ Statement verifying identity of above copies8. ☐ 37 CFR 3.73(b) Statement (when there is an assignee)☐ Power of Attorney9. ☐ English Translation Document (if applicable)10. ☒ Information Disclosure Statement (IDS)/PTO-1449☒ Copies of IDS Citations11. ☒ Preliminary Amendment (17 pgs.)☒ Formal Drawings [Total Sheets 13]☐ Letter to Official Draftsperson Including Drawings [Total Pages]12. ☒ Return Receipt Postcard13. ☐ Certified Copy of Priority Document(s)14. ☐ Deletion of Inventor(s)

Signed statement attached deleting inventor(s) named in the prior application.

15. ☐ CD in duplicate for large table or computer program.16. ☒ Other:

Recordation Form Cover Sheet

Assignment

Statement Regarding Small Entity Status

17. ☒ If a CONTINUING APPLICATION, amend the specification by inserting on page 1, before the first line, the sentence:

--This is a

☒ Continuation of prior application Serial No. 09/116,558

Priority to the above application(s) is claimed under 35 U.S.C. 120.

Prior application information: Examiner: T. Dixon. Group/Art Unit: 2161.

18. ☐ Priority - 35 U.S.C. 119☐ Priority of application Serial No. _____ filed on _____ in _____ is claimed under 35 U.S.C. 119.☐ The certified copy has been filed in prior U.S. application Serial No. _____/_____ on _____.☐ The certified copy will follow.

CORRESPONDENCE ADDRESS

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SIGNATURE BLOCK

Date: July 27, 2001
Reg. No. 47,416
Tel. No.: (617) 248-7690
Fax No.: (617) 248-7100

Respectfully submitted,

*Elias Behrakis*Elias C. Behrakis
Agent for Applicants
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High Street Tower
125 High Street
Boston, MA 02110

1130 U.S. PTO

07/27/01

FEE TRANSMITTAL

FY 2001

Complete if Known

| | |
|---------------------------|------------------|
| Application Serial Number | Not Yet Assigned |
| Filing Date | Herewith |
| First Named Inventor | Salas |
| Group Art Unit | Not Yet Assigned |
| Examiner Name | Not Yet Assigned |
| Attorney Docket No. | ITI-002CN |

| METHOD OF PAYMENT | | | | FEE CALCULATION (continued) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---------------------------------|--|--------------|--|---------------------------------|---------------|------|-----------------------|-----------------------|-----------------|----------|--------------|-------|-------------------------------------|--------------------|---------|--------------|--|---|-------------------|-----|---------------------------|--------------|--------|------------------------|--|--|----------|------------------------|--|--|-----|----------|---|--|-----|-----|--|--|-------|-----|---|--|-------|-----|--|--|-----|-----|------------------|--|-----|-----|--|--|-----|-----|--------------------------|--|-----|-----|-------------------------------|--|----|----|---|--|-----|-----|--|--|-----|-----|---|--|-----|-----|--|--|--|--|---------------------------|-------|---------------------------|--|--|--|---------------------------|--|--|--|
| 1. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other | | | | 3. ADDITIONAL FEES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input checked="" type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit. | | | | <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Large Entity Fee (\$)</th> <th style="width: 10%;">Small Entity Fee (\$)</th> <th style="width: 50%;">Fee Description</th> <th style="width: 30%;">Fee Paid</th> </tr> </thead> <tbody> <tr><td>130</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>50</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>130</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>2,520</td><td>2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>110</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>390</td><td>195</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>890</td><td>445</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1,390</td><td>695</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1,890</td><td>945</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>310</td><td>155</td><td>Notice of Appeal</td><td></td></tr> <tr><td>310</td><td>155</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>270</td><td>135</td><td>Request for oral hearing</td><td></td></tr> <tr><td>130</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>50</td><td>50</td><td>Petitions related to provisional applications</td><td></td></tr> <tr><td>180</td><td>180</td><td>Submission of Information Disclosure Statement</td><td></td></tr> <tr><td>710</td><td>355</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>710</td><td>355</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td></td><td></td><td>Recordation of Assignment</td><td>40.00</td></tr> <tr><td colspan="4">Other fee (Specify) _____</td></tr> <tr><td colspan="4">Other fee (Specify) _____</td></tr> </tbody> </table> | | | | Large Entity Fee (\$) | Small Entity Fee (\$) | Fee Description | Fee Paid | 130 | 65 | Surcharge - late filing fee or oath | | 50 | 25 | Surcharge - late provisional filing fee or cover sheet | | 130 | 130 | Non-English specification | | 2,520 | 2,520 | For filing a request for reexamination | | 110 | 55 | Extension for reply within first month | | 390 | 195 | Extension for reply within second month | | 890 | 445 | Extension for reply within third month | | 1,390 | 695 | Extension for reply within fourth month | | 1,890 | 945 | Extension for reply within fifth month | | 310 | 155 | Notice of Appeal | | 310 | 155 | Filing a brief in support of an appeal | | 270 | 135 | Request for oral hearing | | 130 | 130 | Petitions to the Commissioner | | 50 | 50 | Petitions related to provisional applications | | 180 | 180 | Submission of Information Disclosure Statement | | 710 | 355 | Filing a submission after final rejection (37 CFR 1.129(a)) | | 710 | 355 | For each additional invention to be examined (37 CFR 1.129(b)) | | | | Recordation of Assignment | 40.00 | Other fee (Specify) _____ | | | | Other fee (Specify) _____ | | | |
| Large Entity Fee (\$) | Small Entity Fee (\$) | Fee Description | Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 130 | 65 | Surcharge - late filing fee or oath | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 50 | 25 | Surcharge - late provisional filing fee or cover sheet | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 130 | 130 | Non-English specification | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 110 | 55 | Extension for reply within first month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 390 | 195 | Extension for reply within second month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 890 | 445 | Extension for reply within third month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1,390 | 695 | Extension for reply within fourth month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1,890 | 945 | Extension for reply within fifth month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 310 | 155 | Notice of Appeal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 310 | 155 | Filing a brief in support of an appeal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 270 | 135 | Request for oral hearing | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 130 | 130 | Petitions to the Commissioner | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 50 | 50 | Petitions related to provisional applications | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 180 | 180 | Submission of Information Disclosure Statement | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 710 | 355 | Filing a submission after final rejection (37 CFR 1.129(a)) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 710 | 355 | For each additional invention to be examined (37 CFR 1.129(b)) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Recordation of Assignment | 40.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other fee (Specify) _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other fee (Specify) _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3. <input checked="" type="checkbox"/> Applicant claims small entity status. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FEE CALCULATION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. FILING FEE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th></th> <th></th> <th></th> </tr> <tr> <th>Fee (\$)</th> <th>Fee Description</th> <th></th> <th>Fee Paid</th> <th></th> </tr> </thead> <tbody> <tr><td>710</td><td>Utility filing fee</td><td></td><td>710.00</td><td></td></tr> <tr><td>320</td><td>Design filing fee</td><td></td><td></td><td></td></tr> <tr><td>150</td><td>Provisional filing fee</td><td></td><td></td><td></td></tr> </tbody> </table> | | | | Large Entity | | | | | Fee (\$) | Fee Description | | Fee Paid | | 710 | Utility filing fee | | 710.00 | | 320 | Design filing fee | | | | 150 | Provisional filing fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Large Entity | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee (\$) | Fee Description | | Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 710 | Utility filing fee | | 710.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 320 | Design filing fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 150 | Provisional filing fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Number Filed</th> <th>Number Extra</th> <th>Rate</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>23</td> <td>- 20 = 3</td> <td>x \$ 18.00 =</td> <td>54.00</td> </tr> <tr> <td>Independent Claims</td> <td>3</td> <td>- 3 = 0</td> <td>x \$ 80.00 =</td> <td>0.00</td> </tr> <tr> <td colspan="4">Multiple Dependent Claim(s), if any</td> <td>\$270.00 =</td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL:</td> <td>764.00</td> </tr> <tr> <td colspan="4" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> <td>382.00</td> </tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (1)</td> <td>(\$ 382.00)</td> </tr> </tbody> </table> | | | | | Number Filed | Number Extra | Rate | Amount | Total Claims | 23 | - 20 = 3 | x \$ 18.00 = | 54.00 | Independent Claims | 3 | - 3 = 0 | x \$ 80.00 = | 0.00 | Multiple Dependent Claim(s), if any | | | | \$270.00 = | TOTAL: | | | | 764.00 | SMALL ENTITY DISCOUNT: | | | | 382.00 | SUBTOTAL (1) | | | | (\$ 382.00) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Number Filed | Number Extra | Rate | Amount | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Claims | 23 | - 20 = 3 | x \$ 18.00 = | 54.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Independent Claims | 3 | - 3 = 0 | x \$ 80.00 = | 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Multiple Dependent Claim(s), if any | | | | \$270.00 = | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL: | | | | 764.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SMALL ENTITY DISCOUNT: | | | | 382.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (1) | | | | (\$ 382.00) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. AMENDMENT CLAIM FEES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Claims Remaining After Amend.</th> <th>Highest No. Previously Paid For</th> <th>Present Extra</th> <th>Rate</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total 50</td> <td>- 23 =</td> <td>27</td> <td>x \$ 18.00 =</td> <td>486</td> </tr> <tr> <td>Indep. 5</td> <td>- 3 =</td> <td>2</td> <td>x \$ 80.00 =</td> <td>160</td> </tr> <tr> <td colspan="4">First Presentation of Multiple Dep. Claim</td> <td>+ \$270.00 =</td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL:</td> <td>(\$ 646)</td> </tr> <tr> <td colspan="4" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> <td>(\$ 323)</td> </tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (2)</td> <td>(\$ 323)</td> </tr> </tbody> </table> | | | | Claims Remaining After Amend. | Highest No. Previously Paid For | Present Extra | Rate | Fee Paid | Total 50 | - 23 = | 27 | x \$ 18.00 = | 486 | Indep. 5 | - 3 = | 2 | x \$ 80.00 = | 160 | First Presentation of Multiple Dep. Claim | | | | + \$270.00 = | TOTAL: | | | | (\$ 646) | SMALL ENTITY DISCOUNT: | | | | (\$ 323) | SUBTOTAL (2) | | | | (\$ 323) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Claims Remaining After Amend. | Highest No. Previously Paid For | Present Extra | Rate | Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total 50 | - 23 = | 27 | x \$ 18.00 = | 486 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Indep. 5 | - 3 = | 2 | x \$ 80.00 = | 160 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| First Presentation of Multiple Dep. Claim | | | | + \$270.00 = | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL: | | | | (\$ 646) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SMALL ENTITY DISCOUNT: | | | | (\$ 323) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (2) | | | | (\$ 323) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | SUBTOTAL (3) (\$ 40.00) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | | | | SUBTOTAL (1) 382.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | SUBTOTAL (2) 323.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | SUBTOTAL (3) 40.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | TOTAL (\$ 745.00) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CORRESPONDENCE ADDRESS | | | | SIGNATURE BLOCK | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100 | | | | Respectfully submitted, <u>Elias Behrakis</u> Elias C. Behrakis Agent for the Applicants Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |